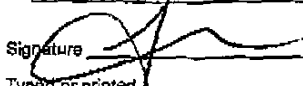
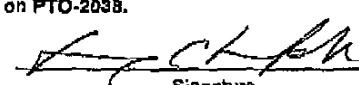


PTO/SB/31 (03-03)

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) A1771-4/T19930
<p>I hereby certify that this correspondence is being transmitted via facsimile to: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460 at 703-872-8311 on December 3, 2003.</p>		
<p>Signature </p> <p>Typed or printed name <u>Andrea S. Beck</u></p>		<p>In re Application of <b>SEBASTIEN RAOUX</b></p> <p>Application Number <b>08/988,246</b></p> <p>Filed <b>December 1, 1997</b></p> <p>For <b>METHOD AND APPARATUS FOR MONITORING AND ADJUSTING CHAMBER IMPEDANCE</b></p>
<p>Art Unit <b>1783</b></p>		<p>Examiner <b>Rudy Zervigon</b></p>
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p>		
<p>The fee for this Notice of Appeal is (37 CFR 1.17(b))</p>		\$0
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:</p>		\$.
<p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p>		
<p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>		
<p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p>		
<p><input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. . I have enclosed a duplicate copy of this sheet.</p>		
<p><input checked="" type="checkbox"/> Applicant already paid the fee for the Notice of Appeal filed on April 15, 2002 in the above-referenced application.</p>		
<p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>		
<p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>41,405</u></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p>		<p> Signature</p> <p><u>Chun-Pok Leung</u> Typed or printed name</p> <p><u>650-326-2400</u> Telephone number</p> <p><u>12-3-03</u> Date</p>
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>		
<p><input checked="" type="checkbox"/> Total of 1 forms are submitted.</p>		

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